

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/624,062
Filing Date	July 21, 2003
First Named Inventor	Jeffrey Hutchinson
Art Unit	1761
Examiner Name	Thuy Tran Lien
Attorney Docket No.	RWB-040US1

**ENCLOSURES (Check all that apply)**

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation,<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) ____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication<br>to TC<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply<br>Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below):<br>Form 2038<br>Return Postcard |
|--|---|---|

**Remarks:****SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm Name	Ratner Prestia		
Signature			
Printed Name	Costas S. Krikelis		
Date	June 30, 2006	Registration No.	28,028

**CERTIFICATE OF TRANSMISSION / MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or Printed Name	Gayle D. Bay	Date	June 30, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Effective on 12/08/04.

Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).

**FEE TRANSMITTAL  
For FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 310.00**Complete if Known**

Application Number	10624,062
Filing Date	July 21, 2003
First Named Inventor	Jeffery Hutchinson
Examiner Name	Thuy Tran Lien
Art Unit	1761
Attorney Docket No.	RWB-040US1

**METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	Small Entity	
Utility	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Design	300	150	500	250	200	100	
Plant	200	100	100	50	130	65	
Reissue	200	100	300	150	160	80	
Provisional	300	150	500	250	600	300	
	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
- 20 or HP =		x	=	<b>Fee (\$)</b> <b>Fee Paid (\$)</b>

HP = highest number of total claims paid for, if greater than 20

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =		x	=

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Filing Appeal Brief and 1 month Extension of Time**Fees Paid (\$)**310.00**SUBMITTED BY****Complete (if applicable)**

Signature	<u>Costas S. Krikelis</u>	Registration No. Attorney/Agent)	28,028	Telephone	(302)778-2500
Name (Print/Type)	Costas S. Krikelis			Date	June 30, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

**RatnerPrestia**

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**CREDIT CARD/DEPOSIT ACCOUNT CHARGE**

Valley Forge



Wilmington

Date of Charge:

June 30, 2006☒ charge to American Express Acct. #:

(Gayle Bay)

☐ charge to PTO Deposit Account:

(Please attach copy of Fee Transmittal Sheet)

☐ charge to EPO Deposit Account:

(Please attach copy of Fee Transmittal Sheet)

In the amount of:

\$ 310.00

Client/Matter:

RWB-040US1**PLEASE CHECK THE APPROPRIATE BOX**

D	Disbursement	SHADED AREA FOR BILLING USE ONLY Standard Firm Charges
<b>Patents:</b>		
<input type="checkbox"/>	Filing Fee (New Application) <input type="checkbox"/> Prepared and Filed by RP <input type="checkbox"/> Prepared by another Firm (ready for filing)	10 New Patent Application
<input type="checkbox"/>	Filing Fee (Divisional Application)	11 Divisional Application
<input type="checkbox"/>	Filing Fee (Continuation Application)	12 Continuation Application
<input type="checkbox"/>	Filing Fee (PCT Nationalization)	13 US PCT Nationalization from non-US PCT
<input type="checkbox"/>	Filing Fee (US Non-Provisional) <input type="checkbox"/> Based on Prior Provisional application filed by RP (without change)	14 US Non-Provisional from US Provisional
<input type="checkbox"/>	Missing Parts Fee	15 Response to Notice of Missing Parts/Missing Requirements
<input type="checkbox"/>	Issue Fee/Publication Fee	16 Issue Fee/Publication Fee
<input type="checkbox"/>	RCE Fee	17 Request for Continuing Examination
<input type="checkbox"/>	Recordation Fee	18 Assignment Recordation
<input type="checkbox"/>	IDS Fee	27 Information Disclosure Statement
<input type="checkbox"/>	US Patent Maintenance Fee	51 US Patent Maintenance Fee
<input type="checkbox"/>	PCT Application Fee <input type="checkbox"/> Based on Prior U.S. application filed by RP (without change) <input type="checkbox"/> Not based on Prior U.S. application (without change) <input type="checkbox"/> Demand for IPE PCT Application	60 US PCT Application (prior US application)  66. Demand for Int'l Preliminary Examination
<input type="checkbox"/>	Additional Claims	
<b>Trademarks:</b>		
<input type="checkbox"/>	Application Fee	80 TM/SM Registration Application
<input type="checkbox"/>	Section 8 & 15 Fee	81 TM/SM Section 8 & 15 Declaration
<input type="checkbox"/>	Renewal Application Fee	82 TM/SM Renewal Application
<input type="checkbox"/>	Fee for Extension of Time to File Statement of Use	83 Petition to Extend Time in ITU
<input type="checkbox"/>	Amendment to Allege Use Fee	84 Amendment to Allege Use in ITU Application
<input type="checkbox"/>	Statement of Use Fee	85 Statement of Use in ITU Application
<b>Other PTO Disbursements:</b>		
<input checked="" type="checkbox"/>	Extension Fee for Response to Office Action	
<input type="checkbox"/>	Notice of Opposition Fee	
<input type="checkbox"/>	Notice of Appeal Fee	
<input checked="" type="checkbox"/>	Other (please explain): <u>Filing an Appeal Brief (small entity)</u>	
<b>Other Non-PTO Disbursements:</b>		
<input type="checkbox"/>	Foreign Filing - Legalization of document(s) for filing in [specify country] _____ Make check payable to _____	